Filing Fee: \$20.00

ID Number: <u>154846</u>

 $\mathbf{e}_{\mathbf{x}}$



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

STATEMENT OF CHANGE OF RESIDENT AGENT

Pursuant to the provisions of Section 7-16-11 of the General Laws, 1956, as amended, the undersigned authorizes a change of its resident agent and the address of its resident agent in the state of Rhode Island as follows:	
1.	The name of the limited liability company is:
	400 New River Road, LLC
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
	33 College Hill Road, Suite 15-E, Warwick, RI 02886
3.	The NEW address of the resident agent is: 89 Indian Avenue, Portsmouth, RI 02871
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
	K. Joseph Shekarchi, Esq.
5.	The name of the NEW resident agent is: Angelo F. Grilli
6.	The appointment of a new resident agent and the change of address of the resident agent, as the case may be, shall become effective upon the filing of this statement.
	Under penalty of perjury, I declare that the information contained herein is true and correct.
Da	te: 10/15/07 400 New River Road, UC Print Name of Kimited Liability Company
	FILED
	OCT 16 2007 10:23 Signature of Authorized Person
	av two
	039572

Form No. 642 Revised: 12/05